

Name: _____
Mailing Address: _____
City, State, Zip Code: _____
Daytime Phone Number: _____
Evening Phone Number: _____
Representing: ☐ Self ☐ Petitioner ☐ Respondent
State Bar Number: _____

**IN THE SUPERIOR COURT FOR THE STATE OF ARIZONA
IN AND FOR THE COUNTY OF COCONINO**

In re the matter of _____,)	
Petitioner,)	Case No. DO _____
and _____,)	
)	ORDER OF REFERRAL
Respondent.)	
_____)	

IT IS ORDERED referring this matter to:

- ☐ 677-COURT OF CONCILIATION SERVICES
- ☐ 688-ALTERNATIVE DISPUTE RESOLUTION FOR MEDIATION (fees applicable)
- ☐ 625-PRIVATE EVALUATION (fees applicable)

CASE STATUS: ☐ PRE-DISSOLUTION
☐ POST-DISSOLUTION
☐ PRE-JUDGMENT PATERNITY/NO DISSOLUTION
☐ POST-JUDGMENT PATERNITY/NO DISSOLUTION

REASON FOR REFERRAL:

- ☐ PROPERTY/ASSETS MEDIATION (cc: AdiShakti Khalsa ADR)
- ☐ PARENTING TIME/CUSTODY MEDIATION (cc: Bob Tures; Guidance Center)
- ☐ CUSTODY EVALUATION (cc: Sid Buckman; Guidance Center)
- ☐ FOCUSED EVALUATION (cc: Sid Buckman; Guidance Center) see Comments below

MISC INFORMATION:

HAS AN ORDER OF PROTECTION BEEN ISSUED? ☐ YES ☐ NO

Comments:

Date: _____ Judge: _____

cc: Petitioner/Attorney
Respondent/Attorney
☐ ADR
☐ Guidance Center
☐ Bob Tures
☐ Sid Buckman